63

UNITED PIONEER HOME 210 PARK AVENUE

Number of Residents on 12/31/03:

LUCK	54853	Phone: (715) 472-2164	
Operated from	1/1 To 12/31	Days of Operation:	365
Operate in Con	junction with	Hospital?	No
Number of Beds	Set Up and St	affed (12/31/03):	74
Total Licensed	Bed Capacity	(12/31/03):	75

Ownership: Non-Profit Corporation Highest Level License: Skilled

Operate in Conjunction with CBRF? No Title 18 (Medicare) Certified? No Title 19 (Medicaid) Certified? Yes Average Daily Census: 66

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/03)	Length of Stay (12/31/03)	용	
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis			%		9.5 55.6	
Supp. Home Care-Household Services	No	Developmental Disabilities		 Under 65			22.2	
Day Services	No	Mental Illness (Org./Psy)	57.1	65 - 74	0.0	İ		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	25.4		87.3	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	60.3	* * * * * * * * * * * * * * * * * * *	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	12.7	Full-Time Equivalent		
Congregate Meals No		Cancer			Nursing Staff per 100 Res:	aff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	15.9	65 & Over	98.4			
Transportation	No	Cerebrovascular	1.6			RNs	7.4	
Referral Service	No	Diabetes	0.0	Gender	용	LPNs	9.9	
Other Services	No	Respiratory	4.8			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	19.0	Male	30.2	Aides, & Orderlies	43.1	
Mentally Ill	No			Female	69.8			
Provide Day Programming for		1	100.0					
Developmentally Disabled	No	1			100.0			
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Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		:	Private Pay	:		amily Care			anaged Care	l 		
Level of Care	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	32	82.1	110	0	0.0	0	20	83.3	126	0	0.0	0	0	0.0	0	52	82.5
Intermediate				7	17.9	91	0	0.0	0	4	16.7	119	0	0.0	0	0	0.0	0	11	17.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		39	100.0		0	0.0		24	100.0		0	0.0		0	0.0		63	100.0

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/03
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	용	As	sistance of	% Totally	Number of
Private Home/No Home Health	30.0	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	20.0	Bathing	0.0		42.9	57.1	63
Other Nursing Homes	15.0	Dressing	20.6		27.0	52.4	63
Acute Care Hospitals	30.0	Transferring	33.3		28.6	38.1	63
Psych. HospMR/DD Facilities	0.0	Toilet Use	25.4		30.2	44.4	63
Rehabilitation Hospitals	0.0	Eating	52.4		19.0	28.6	63
Other Locations	5.0	******	*****	*****	*****	* * * * * * * * * * * * * * * * * * * *	******
Total Number of Admissions	20	Continence		용	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	6.3	Receiving Resp	iratory Care	6.3
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	58.7	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	6.9	Occ/Freq. Incontinen	t of Bowel	22.2	Receiving Suct	ioning	0.0
Other Nursing Homes	6.9				Receiving Osto	my Care	1.6
Acute Care Hospitals	0.0	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	7.9	Receiving Mech	anically Altered Diet	s 20.6
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	86.2	With Pressure Sores		7.9	Have Advance D	irectives	85.7
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	29				Receiving Psyc	hoactive Drugs	58.7

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	orofit	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	8	Ratio	왕	Ratio	양	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	80.7	86.2	0.94	83.7	0.96	84.0	0.96	87.4	0.92
Current Residents from In-County	92.1	78.8	1.17	72.8	1.26	76.2	1.21	76.7	1.20
Admissions from In-County, Still Residing	65.0	24.5	2.65	22.7	2.87	22.2	2.93	19.6	3.31
Admissions/Average Daily Census	30.3	110.9	0.27	113.6	0.27	122.3	0.25	141.3	0.21
Discharges/Average Daily Census	43.9	116.1	0.38	115.9	0.38	124.3	0.35	142.5	0.31
Discharges To Private Residence/Average Daily Census	3.0	44.0	0.07	48.0	0.06	53.4	0.06	61.6	0.05
Residents Receiving Skilled Care	82.5	94.4	0.87	94.7	0.87	94.8	0.87	88.1	0.94
Residents Aged 65 and Older	98.4	96.1	1.02	93.1	1.06	93.5	1.05	87.8	1.12
Title 19 (Medicaid) Funded Residents	61.9	68.3	0.91	67.2	0.92	69.5	0.89	65.9	0.94
Private Pay Funded Residents	38.1	22.4	1.70	21.5	1.77	19.4	1.96	21.0	1.82
Developmentally Disabled Residents	0.0	0.6	0.00	0.7	0.00	0.6	0.00	6.5	0.00
	57.1		1.55						
Mentally Ill Residents		36.9		39.1	1.46	36.5	1.56	33.6	1.70
General Medical Service Residents	19.0	17.2	1.10	17.2	1.11	18.8	1.01	20.6	0.93
Impaired ADL (Mean)	59.4	48.1	1.23	46.1	1.29	46.9	1.26	49.4	1.20
Psychological Problems	58.7	57.5	1.02	58.7	1.00	58.4	1.00	57.4	1.02
Nursing Care Required (Mean)	4.6	6.8	0.67	6.7	0.68	7.2	0.64	7.3	0.62